



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form PTO 149A/PTO  
**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**  
(Use as many sheets as necessary)

Complete if Known

Application Number	09/809586
Filing Date	March 15, 2001
First Named Inventor	Shirley, Brian
Group Art Unit	2818
Examiner Name	Unknown PHAN

Sheet 1 of 1

Attorney Docket No: 00303.724US1

**US PATENT DOCUMENTS**

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Class	Subclass	Filing Date If Appropriate
--------------------	---------------------	------------------	---	-------	----------	----------------------------

**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Class	Subclass	T <sup>2</sup>
--------------------	---------------------	------------------	---	-------	----------	----------------

**OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
TP		"Rambus Direct RDRAM 128/144-Mbit (256kx16/18x32s) Preliminary Information", Document DL0059, V1.11, (June 2000), pp. 1-66	
TP		"Rambus Direct RDRAM 256/288-Mbit (1Mx16/18x16d) Preliminary Information", Document DL 0105, V1.1, (August 2000), pp. 1-72	

EXAMINER

Trong Phan

DATE CONSIDERED

6/4/02

Substitute Disclosure Statement Form (PTO-1449)

\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional) <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached